PART B - FEE(S) TRANSMITTAL

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P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed where supported at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 should be completed at All Section 1 through 5 shoul

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

26646 7590 08/03/2011 KENYON & KENYON LLP ONE BROADWAY

NEW YORK, NY 10004

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Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmitts is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USFTO (5/1) 273-2885, on the date indicated below,

Filed via EFS-WEB (Depositor's name /Neil H. Benowitz September 23, 2011 Moto

ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR Franciscus Hubertus Maria Stappers 13877/16601 4994 10/567.331 03/01/2006

SMALL ENTITY PUBLICATION FEE DUE | PREV. PAID ISSUE FEE TOTAL SERVED DUE DATE DIE APPLN, TYPE ISSUE FEE DUE \$1810 11/03/2011 nonprovisional NΩ \$1510 \$300 ART UNIT CLASS-SUBCLASS EXAMINER PAUL, JESSICA MARIE 1767 524-589000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 KENYON & KENYON LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. I "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47; Rev 03-0: Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

TITLE OF INVENTION: PAINT COMPRISING A LIQUID PHASE AND AN ACTIVE POWDER PHASE

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

AKZO NOBEL COATINGS INTERNATIONAL B.V. ARNHEM, THE NETHERLANDS

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government

4h. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted)

A check is enclosed. Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-0600 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

Advance Order - # of Copies

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature / Kevin T. Godlewski/

Date September 23, 2011

Typed or printed name Kevin T. Godlewski

Registration No. 47,598

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